	Case	23-13//8-am	c Doc 17	Filed 01/29/	24 Ente	red 01/	29/24 13:4	3:22	Desc Ma	แท
Fill	l in this information	to identify your case:		Document	Page 1	of 3	Check as	s directed i	in lines 17 an	d 21:
_	- latera d	Descri		T			Accordin Stateme	•	lculations red	quired by this
D	ebtor 1	Ryan First Name	Middle Name	Timmons Last Name		-				
	obtor 2								come is not o	
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		-			come is dete	
	leite d'Otata e Dandon			ern District of Penr	evlvanja				§ 1325(b)(3)	
		uptcy Court for the:		in district of Ferri	isyivailia	—			ent period is	
	ase number known)	23-13778-aı	nc				₫ 4. The	e commitm	ent period is	5 years.
	,						Chec	k if this is a	an amended f	iilina
~ .	·c	1000 1					_01100	K II (IIIO IO C	iii ainionaca i	mig
<u>Ut</u>	ficial Form	122C-1								
Cł	hapter 13	Stateme	nt of Your	Current	Month	lv Inc	ome			
	-	ation of Co								10/19
		ccurate as possible.				aually roo	noncible for bei	na cooura	to If more or	
atta	ch a separate she	et to this form. Includ								
and	case number (if k	nown).								
Pa	rt 1: Calculate	Your Average Mo	onthly Income							
1.	What is your ma	rital and filing status	? Check one only.							
	Not married.	Fill out Column A, line	s 2-11.							
	Married. Fill o	ut both Columns A ar	d B, lines 2-11.							
Fi	ill in the average n	nonthly income that y	ou received from	all sources derive	nd during the f	S full mont	hs hefore you fi	lo this han	kruntov caso	1111508
10	01(10A). For exam	ple, if you are filing or	September 15, th	e 6-month period v	vould be March	h 1 through	August 31. If th	e amount	of your month	hly income
		months, add the incor ouses own the same r								
	0 in the space.		orital proporty, par		at proporty in c	5110 00101111	romy. Ir you nav	o noamig t	o report for a	my mio, wite
							ımn A	Column		
						Deb	tor 1	Debtor 2	2 or ng spouse	
								11011 11111	ig opodoc	1
2.	Your gross wage payroll deduction	es, salary, tips, bonus s).	es, overtime, and	commissions (bef	ore all		\$23,688.28			
2	. ,	,	D				40.00			
3.	Alimony and ma	intenance payments.	Do not include pay	ments from a spor	use.		\$0.00			
4.		n any source which a				or				
		s, including child sup r, members of your h								
		ot include payments					40.00			
	on line 3.						\$0.00			
5.	Net income from	operating a busines	s profession or							
Ο.	farm	operating a busines	s, profession, or	Debtor 1	Debtor 2					
	Gross receipts (b	efore all deductions)		\$0.00	\$0.00					
		,	oncos	- \$0.00 -	\$0.00					
	Ordinary and ned	essary operating exp	enses			0				
	Net monthly inco	me from a business, լ	profession, or farm	\$0.00		Copy here →	\$0.00			
6.	Net income from	rental and other rea	property	Debtor 1	Debtor 2					
	Gross receipts (b	efore all deductions)		\$0.00	\$0.00					

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

\$0.00

\$0.00

Сору

\$0.00

\$0.00

\$0.00

Case 23-13778-amc Doc 17 Filed 01/29/24 Entered 01/29/24 13:43:22 Desc Main

Debtor 1 Ryan Decument Page 2 of 3 Case number (if known) 23-13778-amc

First Name Middle Name Last Name	_		
	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
7. Interest, dividends, and royalties	\$0.00		
8. Unemployment compensation	\$0.00		
Do not enter the amount if you contend that the amount received was a benefit under			
the Social Security Act. Instead, list it here:			
For you			
For your spouse			
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	\$0.00		
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.			
Total amounts from separate pages, if any.	+	+	
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$23,688.28	+	= \$23,688.28 Total average
Part 2: Determine How to Measure Your Deductions from Income			monthly income
12. Copy your total average monthly income from line 11.			\$23,688.28
13. Calculate the marital adjustment. Check one:			
☑ You are not married. Fill in 0 below.			
You are married and your spouse is filing with you. Fill in 0 below.			
You are married and your spouse is not filing with you.			
Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid your dependents, such as payment of the spouse's tax liability or the spouse's support of dependents.			
Below, specify the basis for excluding this income and the amount of income devoted to additional adjustments on a separate page.	each purpose. If necess	ary, list	
If this adjustment does not apply, enter 0 below.			
	\$0.00 Conv	hana X =	\$0.00
Total	Сору	here. →	
14. Your current monthly income. Subtract the total in line 13 from line 12.			\$23.688.28

Case 23-13778-amc Doc 17 Filed 01/29/24 Entered 01/29/24 13:43:22 Desc Main

Debtor 1	Ryan	Decument Page 3 of 3 Case number	per (if known) 23-13778-amc
	First Name Middle Nar	me Last Name	
	te your current monthly income for		
	• •		
M	ultiply line 15a by 12 (the number of r	nonths in a year).	x 12
15b. T	he result is your current monthly inco	ome for the year for this part of the form	\$284,259.36
	ate the median family income that ap		
	ill in the state in which you live.	Florida	
16D. F	ill in the number of people in your hou	usenoid.	
16c. F	ill in the median family income for you	ur state and size of household.	\$60,483.00
		ne amounts, go online using the link specified in the separate also be available at the bankruptcy clerk's office.	
17. How do	the lines compare?		
17a.		line 16c. On the top of page 1 of this form, check box 1, <i>Disposable inc</i> 3. Do NOT fill out <i>Calculation of Your Disposable Income</i> (Official Form	
17b.	Line 15b is more than line 16c. O 1325(b)(3). Go to Part 3 and fill c current monthly income from line	On the top of page 1 of this form, check box 2, <i>Disposable income is de</i> bout Calculation of Your Disposable Income (Official Form 122C–2). O 14 above.	etermined under 11 U.S.C. § In line 39 of that form, copy your
Part 3: Ca	•	iod Under 11 U.S.C. §1325(b)(4)	
18 Copy v	our total avorage monthly income fr	om line 11	
			\$23,688.28
calcula		If you are married, your spouse is not filing with you, and you contend U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income	
19a. If th	ne marital adjustment does not apply,	fill in 0 on line 19a.	
19b. Sul	otract line 19a from line 18.		\$23,688.28
20. Calcula	ate your current monthly income for	the year. Follow these steps.	
20a Con	v line 19h		\$23,688.28
•	iply by 12 (the number of months in a		x 12
		•	
20b. The	result is your current monthly income	for the year for this part of the form.	\$284,259.36
20c. Copy	y the median family income for your s	state and size of household from line 16c	\$60,483.00
21. How do	the lines compare?		
	20b is less than line 20c. Unless othe commitment period is 3 years. Go to F	erwise ordered by the court, on the top of page 1 of this form, check box Part 4.	x 3,
	20b is more than or equal to line 20c. A box 4, <i>The commitment period is</i> 5 y	Unless otherwise ordered by the court, on the top of page 1 of this for years. Go to Part 4.	m,
Part 4: Si	gn Below		
By signii	ng here, under penalty of perjury I dec	clare that the information on this statement and in any attachments is t	rue and correct.
X	/s/ Ryan Timmons		
	Signature of Debtor 1		

Date 01/29/2024

MM/ DD/ YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C–2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.